

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State

02-02-2005 90057 005 ***150.00

DOCUMENT # P04000117692 1. Entity Name GLOBAL CAPITAL FUNDING INC.			
Principal Place of Business 672 BROADOAK LOOP SANFORD, FL 32771		Mailing Address 672 BROADOAK LOOP SANFORD, FL 32771	
2. Principal Place of Business 2500 W LAKE HARY BLVD		3. Mailing Address 2500 W LAKE HARY BLVD	
Suite, Apt. #, etc. SUITE 107		Suite, Apt. #, etc. SUITE 107	
City & State LAKE HARY, FLORIDA		City & State LAKE HARY, FLORIDA	
Zip 32746		Zip 32746	
Country SEMINOLE		Country SEMINOLE	
4. FEI Number 84-1654446		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BUSINESS FILINGS INCORPORATED 660 E JEFFERSON ST TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP MEJIA, JOSELUIS 672 BROADOAK LOOP SANFORD, FL 32771 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JOSE LUIS MEJIA 2500 W LAKE HARY BVD. #107 LAKE HARY, FL 32746 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT HART, ERIC 672 BROADOAK LOOP SANFORD, FL 32771 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like powers.			
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR			

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